

**Table 13**  
**North Carolina Medicaid**  
**State Fiscal Year 2001**  
**Expenditures for the Disabled & Blind**

<u>Type of Service</u>	<u>Disabled</u>	<u>Percent of Service Dollars</u>	<u>Blind</u>	<u>Percent of Service Dollars</u>	<u>Total Blind &amp; Disabled Dollars</u>	<u>SFY 2001 % of Total Dollars</u>	<u>SFY 2000 % of Total Dollars</u>
Inpatient Hospital	\$ 353,629,213	15.6%	\$ 1,909,933	7.1%	\$ 355,539,146	15.5%	16.3%
Outpatient Hospital	135,715,933	6.0%	1,042,153	3.9%	\$ 136,758,086	6.0%	5.7%
Mental Hospital (> 65)	42,912	0.0%	-	0.0%	\$ 42,912	0.0%	0.0%
Psychiatric Hospital (< 21)	4,850,222	0.2%	3,702	0.0%	\$ 4,853,925	0.2%	0.2%
Physician	166,013,229	7.3%	1,320,192	4.9%	\$ 167,333,421	7.3%	6.7%
Clinics	156,896,947	6.9%	635,754	2.4%	\$ 157,532,701	6.9%	7.0%
Nursing Facility:							
Skilled Level	57,918,070	2.6%	1,311,144	4.9%	\$ 59,229,214	2.6%	2.9%
Intermediate Level	38,489,562	1.7%	1,441,399	5.4%	\$ 39,930,960	1.7%	1.6%
Intermediate Care Facility:							
(Mentally Retarded)	364,224,158	16.0%	6,964,696	26.0%	\$ 371,188,854	16.2%	17.9%
Dental	17,719,932	0.8%	131,440	0.5%	\$ 17,851,372	0.8%	0.8%
Prescription Drugs	439,578,532	19.4%	3,643,287	13.6%	\$ 443,221,819	19.3%	18.0%
Home Health	82,943,268	3.7%	1,135,602	4.2%	\$ 84,078,871	3.7%	4.1%
CAP/Disabled Adult	46,131,570	2.0%	1,632,379	6.1%	\$ 47,763,949	2.1%	2.0%
CAP/Mentally Retarded	213,492,098	9.4%	2,413,244	9.0%	\$ 215,905,342	9.4%	8.7%
CAP/Children	15,919,658	0.7%	6,982	0.0%	\$ 15,926,640	0.7%	0.6%
Personal Care	30,750,609	1.4%	1,184,263	4.4%	\$ 31,934,872	1.4%	1.3%
Hospice	6,088,468	0.3%	33,305	0.1%	\$ 6,121,774	0.3%	0.3%
EPSDT (Health Check)	1,118,396	0.0%	7,531	0.0%	\$ 1,125,927	0.0%	0.1%
Lab & X-ray	3,826,729	0.2%	37,198	0.1%	\$ 3,863,927	0.2%	0.2%
Adult Home Care	41,941,109	1.8%	325,619	1.2%	\$ 42,266,728	1.8%	1.7%
High Risk Intervention Residential	1,625,370	0.1%	-	0.0%	\$ 1,625,370	0.1%	
Other Services	32,211,853	1.4%	332,318	1.2%	\$ 32,544,171	1.4%	1.4%
<b>Total Services</b>	<b>\$ 2,211,127,839</b>	<b>97.4%</b>	<b>\$ 25,512,142</b>	<b>95.1%</b>	<b>\$ 2,236,639,981</b>		
Medicare, Part A Premiums	5,710	0.0%	571,721	2.1%	\$ 577,431	0.0%	0.0%
Medicare, Part B Premiums	40,826,521	1.8%	580,822	2.2%	\$ 41,407,344	1.8%	1.8%
HMO Premiums	18,405,445	0.8%	163,567	0.6%	\$ 18,569,012	0.8%	0.8%
<b>Total Premiums</b>	<b>\$ 59,237,677</b>	<b>2.6%</b>	<b>\$ 1,316,110</b>	<b>4.9%</b>	<b>\$ 60,553,787</b>		
<b>Grand Total Services &amp; Premiums</b>	<b>\$ 2,270,365,515</b>	<b>100.0%</b>	<b>\$ 26,828,252</b>	<b>100.0%</b>	<b>\$ 2,297,193,767</b>		
<b>Medicare Crossovers*</b>	<b>\$ 77,674,362</b>		<b>\$ 972,327</b>		<b>\$ 78,646,689</b>		
Number of Disabled/Blind Recipients	213,503		2,296		215,799		
<b>Service Expenditures Per Recipients**</b>	<b>\$ 10,634</b>		<b>\$ 11,685</b>		<b>\$ 10,645</b>		

\* Medicare Crossovers are amounts that are billed to Medicare for those Medicaid clients who are also eligible for Medicare.

\*\* Service Expenditures Per Recipient does not include adjustments, settlements or administrative costs.

Source: SFY 2001 Program Expenditure Report and 2082 Report